PHA 5-Year and	U.S. Department of Housing and Urban	OMB No. 2577-0226
	Development	Expires 4/30/2011
Annual Plan	Office of Public and Indian Housing	_

1.0	PHA Information PHA Name: _South Kingstown Housing Au PHA Type: Small ☐ High PHA Fiscal Year Beginning: (MM/YYYY):	Performing	☐ Standard	PHA Code: _RI012 HCV (Section 8)		
2.0	Inventory (based on ACC units at time of F Number of PH units: 70	Y beginning i		CV units:138	-	
3.0	Submission Type	Annual l	Plan Only	5-Year Plan Only		
4.0	PHA Consortia	HA Consortia	a: (Check box if submitting a join	nt Plan and complete table bel	low.)	
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Unit Program PH	ts in Each HCV
	PHA 1: PHA 2:					The v
5.0	PHA 3: 5-Year Plan. Complete items 5.1 and 5.2 or	ly at 5-Year l	l Plan update.			
5.1	Mission. The SKHA mission is the same as that of the opportunity and a suitable living environment.			ment. To promote adequate a	nd affordable, e	economic
5.2	Goals and Objectives. The SKHA will expand the supply and qual environment while promoting Equal Opport			grams. Continually strive to i	mprove the livi	ing
6.0	PHA Plan Update (a) The SKHA has applied a new ACOP an and the Nan McKay agency. (b) The public may obtain copies of the 5-YRI 02879.	C		•		
7.0	Hope VI, Mixed Finance Modernization of Programs, and Project-based Vouchers.				lousing, Home	ownership
8.0	N/A Capital Improvements. Please complete P					
	Capital Fund Program Annual Statement		11	part of the PHA 5-Vear and A	nnual Plan ann	mally
8.1	complete and submit the <i>Capital Fund Prog</i> open CFP grant and CFFP financing.					
8.2	Capital Fund Program Five-Year Action Program Five-Year Action Plan, form HUD for a five year period). Large capital items in	-50075.2, and	d subsequent annual updates (on	a rolling basis, e.g., drop curr		
8.3	Capital Fund Financing Program (CFFP) ☐ Check if the PHA proposes to use any po- finance capital improvements.		apital Fund Program (CFP)/Repl	acement Housing Factor (RH	F) to repay deb	t incurred to

Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

The SKHA will continue to set goals and standards in accordance with HUD regulations and the RI Consolidated Plan, and continue to utilize resources in the most efficient manner. The SKHA will continue to assist in community development, housing opportunities, and social and employment opportunities. We will continue to seek ways to increase the range of strategies, goals and funding sources to meeting the needs of the residents of the SKHA. The SKHA has included in its policies, the Violence Against Women's Act (VAWA). The SKHA VAWA will remain attached to the SKHA Five Year Annual Plan, and has been incorporated in and made part of the Admissions and Continued Occupancy Policy. The SKHA utilizes the resources of the community specializing in domestic violence, and public safety, for assisting residents with domestic violence, dating violence and stalking.

Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.

SKHA will continue to seek an increase in the HCV Vouchers, and increase the amount of Public Housing by acquiring new units or new additional development. We continue to increase payment standards within 90-110%, and has a minimum rent of \$50.00 for both Public and HCV programs.

Additional Information. Describe the following, as well as any additional information HUD has requested.

10.0 (a) Progress in Meeting Mission and Goals Provide a brief statement of the DHA's progress in meeting the mission and goals

- (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.
 - The SKHA utilizes HUD and community resources to educate and train it's staff to provide quality services and develop goals to reach the Housing needs of those in our community.
- (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification."
 - Any and all changes or modifications made are approved by the Board of Commissioners through the Resolution Process.
- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
 - (g) Challenged Elements

9.0

- (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
- (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

- **5.1 Mission**. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.
- **5.2** Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.
- **6.0 PHA Plan Update.** In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:
 - (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
 - (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

 Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures. Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

- 2. Financial Resources. A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
- Rent Determination. A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
- 4. Operation and Management. A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
- Grievance Procedures. A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
- 6. Designated Housing for Elderly and Disabled Families. With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: 1) development name and number; 2) designation type; 3) application status; 4) date the designation was approved, submitted, or planned for submission, and; 5) the number of units affected.
- 7. Community Service and Self-Sufficiency. A description of: (1) Any programs relating to services and amenities provided or offered to assisted families; (2) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; (3) How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (Note: applies to only public housing).
- 8. Safety and Crime Prevention. For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

- Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
- 10. Civil Rights Certification. A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
- Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA.
- 12. Asset Management. A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
- 13. Violence Against Women Act (VAWA). A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.
- 7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers
 - (a) Hope VI or Mixed Finance Modernization or Development. 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm
 - (b) Demolition and/or Disposition. With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm

Note: This statement must be submitted to the extent **that approved and/or pending** demolition and/or disposition has changed.

(c) Conversion of Public Housing. With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/conversion.cfm

- (d) Homeownership. A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) Project-based Vouchers. If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.
- 8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.
 - 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the Capital Fund Program Annual Statement/Performance and Evaluation Report (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:
 - (a) To submit the initial budget for a new grant or CFFP;
 - (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
 - (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

- At the end of the program year; until the program is completed or all funds are expended;
- When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
- Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any

- portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:
- $\underline{http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm}$
- 9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
 - 9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
- **10.0** Additional Information. Describe the following, as well as any additional information requested by HUD:
 - (a) Progress in Meeting Mission and Goals. PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
 - (b) Significant Amendment and Substantial Deviation/Modification. PHA must provide the definition of "significant amendment" and "substantial deviation/modification". (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (Note: Standard and Troubled PHAs complete annually).
- 11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments.
 - (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.1.
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.2.

Par	t I: Summary					
Soutl	South Kingstown Housing Authority RI012		Wakefield, F	Rhode Island	Original 5-Year Plan	Revision No: 3
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	57352	57352	57352	57352
C.	Management Improvements		20000	20000	20000	20000
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations		56870	56870	56870	56870
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		134222	134222	134222	134222
L.	Total Non-CFP Funds					
M.	Grand Total					

Par	t I: Summary (Continua	ation)					
South	South Kingstown Housing Authority RI		Wakefield,	Rhode Island	☐ Original 5-Year Plan ☐ Revision No:		
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014	
		Annual Statement					

Work		eal Needs Work Staten ork Statement for Year 2011		Work	Statement for Year: 2012		
Statement for		FFY 2011		FFY 2012			
Year 1 FFY	Development	Quantity	Estimated Cost	Development	Quantity	Estimated Cost	
	Number/Name	Ţ		Number/Name			
	General Description of			General Description of			
	Major Work Categories			Major Work Categories			
See	12-01 Champagne			12-01 Champagne			
Annual	Renovations		10588	Security cameras		1000	
Statement	landscaping		1000	renovations		10588	
	renovations		10588	landscaping		1000	
	12-03 Champagne			renovations		10588	
	Renovations		10588	12-03 Champagne			
	landscaping		1000	Security cameras		1000	
	Playground/park		11000	renovations		10588	
				landscaping		1000	
	12-1 Fournier						
	Renovations		10588				
	landscaping		1000	12-1 Fournier			
				Security cameras		1000	
				renovations		10588	
	12-04 VG			Playground/park		7000	
	Landscaping		1000	12-04 VG			
				Landscaping		1000	
	Subt	otal of Estimated Cost	\$ 57352	Subtot	al of Estimated Cost	57352	

Page 3 of 6

	porting Pages – Physic			XX7 1	G		
Work	Wo	ork Statement for Year 2013		Work	Statement for Year: 2014		
Statement for	D 1	FFY 2013	F 1.0	FFY 2014			
Year 1 FFY	Development Number/Name	Quantity	Estimated Cost	Development Number/Name	Quantity	Estimated Cost	
	General Description of			General Description of			
	Major Work Categories			Major Work Categories			
See	12-01 Champagne			12-01 Champagne			
Annual	Security cameras		1000	Security cameras		1000	
Statement	paving		10588	Painting		10588	
	Washer/dryer		10588	Washer/dryer		10588	
				12-03 Champagne			
	12-03 Champagne			painting		10000	
	Security cameras		1000	Security cameras		1000	
	Paving		10000	Washer/dryer		10588	
	Washer /dryer		10588	landscaping		1000	
	landscaping		1000	12-1 Fournier			
	12-1 Fournier			Security cameras		1000	
	paving		10588	painting		10588	
	Security cameras		1000	12-04 VG			
				Landscaping		1000	
	12-04 VG						
	Landscaping		1000				
	Coshe	otal of Estimated Cost	57352	Cubtat	al of Estimated Cost	57352	
	Subt	otal of Estimated Cost	3/332	Subtot	ai oi Estimated Cost	31332	

Part III: Sup	porting Pages – Management Needs Worl	x Statement(s)		
Work	Work Statement for Year 20.	11	Work Statement for Year: 20	12
Statement for	FFY 2011		FFY 2012	
Year 1 FFY	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual	HA WIDE		HA WIDE	
Statement	Operations	56870	Operations	56870
	Software support	5000	Software support	5000
	Fee and costs	10000	Fee and costs	10000
	Staff training	5000	Staff training	5000
	Subtotal of Estimated Cost	\$ 134222	Subtotal of Estimated Cost	\$ 134222

Part III: Sup	porting Pages – Management Needs Worl	k Statement(s)			
Work	Work Statement for Year 20	13	Work Statement for Year: 20	14	
Statement for	FFY 2013		FFY 2014		
Year 1 FFY	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
See	HA WIDE		HA WIDE		
Annual	Operations	56870	Operations	56870	
Statement	Software support	5000	Software support	5000	
	Fee and costs	10000	Fee and costs	10000	
	Staff training	5000	Staff training	5000	
	Subtotal of Estimated Cost	\$ 134222	Subtotal of Estimated Cost	\$ 134222	

Capital Fund Financing Program

OMB No. 2577-0226 Expires 4/30/2011

Part I:	Summary				
PHA Na	me:	Grant Typeand Number Capital Fund Program Grant No:	Replacement Housing Facto	r Grant No:	FFY of Grant: 2010
	ingstown Housing Authority	Date of CFFP: R143P01250110			FFY of Grant Approval:
		isasters/Emergencies Revise	d Annual Statement (revision no: Final Performance and Evaluati) on Report	<u>— </u>
Line	Summary by Development Account	Total	Estimated Cost	оп пероп	Total Actual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21)	26844		-	
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 2)	1)			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	40000			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	67378		· · · · · · · · · · · · · · · · · · ·	-
11	1465.1 Dwelling Equipment—Nonexpendable			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a 18ba	1501 Collateralization or Debt Service paid by the PI 9000 Collateralization or Debt Service paid Via System of				
1608	Payment	of Direct			
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	134222			
21	Amount of line 20 Related to LBP Activities			***	
22	Amount of line 20 Related to Section 504 Activities		·		
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation N	1 deasures	·		

To be completed for the Performance and Evaluation Report.
To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary				· · · · · · · · · · · · · · · · · · ·	* .
PHA Name:		and Number Program Grant No:	Replacement Housing Facto	or Grant No:	FFY of Grant: 2010
South Kingstown Housing Authority		RI43P01250110			FFY of Grant Approval:
Performance and Evaluation Report for Period End	for Disasters/Eme ing:	Tet is	d Annual Statement (revision no: Final Performance and Evaluat	,	
Line Summary by Development Account		Tota	Estimated Cost	<u> </u>	Total Actual Cost
		Original	Revised	Obligated	Expended
Signature of Executive Director		Date 3/22/10	Signature of Public Housing	Director	Date
			.		

Part II: Supporting P	ages		Number		CFFP (Ye		Federal FFY of G	rant: 2010	
PHA Name: South Kingstown H	ousing Authority	Capital Fund Progr Replacement Hou	sing Factor Grant 1	01250110 No: Quantity	Total Estim		Total Actu	aal Cost	Status of Work
Development Number Name/PHA-Wide Activities	General Description Catego	ries	Account No.		Original	Revised	Funds Obligated	Funds Expended	
IA WIDE	Operations Consultant		1406 1430		26844 20000 20000				
IA WIDE HA WIDE HA WIDE	Physical Needs A		1430		55378				
12-1 CHAMP	Bathroom renova		1460		12000				
12-1 FOURNIE	KIBattiroom tette								

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011

Federal FFY of Grant: **Part II: Supporting Pages Grant Type and Number** 2010 PHA Name: Capital Fund Program Grant No:RI43P01250110 Replacement Housing Factor Grant No: CFFP (Yes/No): South Kingstown Housing Authority Status of Work Total Actual Cost Total Estimated Cost Development Quantity General Description of Major Work Development Account No. Categories Number Name/PHA-Wide Funds Funds Obligated Revised Activities Original Expended

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: South Kings	Federal FFY of Grant: 2010			
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		Expended nding Date)	Reasons for Revised Target Dates
12-1 Fournier 12-1 Champagne Ha Wide	09/30/2012 09/30/2012 09/30/2012	09/30/2014 09/30/2014 09/30/2014	Actual Expenditure End Date	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Financing Program

OMB No. 2577-0226 Expires 4/30/2011

PHA N		Grant Typeand Number Capital Fund Program Grant No:	Replacement Housing	Factor Grant No:	FFY of Grant: 2007
South K	Gingstown Housing Authority	Date of CFFP: RI43P01250107		. accor Grant 110,	FFY of Grant Approval:
Origi	Grant nal Annual Statement Reserve for Disa rformance and Evaluation Report for Period Ending: 0	sters/Emergencies 9/30/09	Revised Annual Statement (revision no: Final Performance and Ev.		<u> </u>
Line	Summary by Development Account		Total Estimated Cost		Total Actual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21)	39352		39352	39352
3	1408 Management Improvements	5000		5000	5000
4	1410 Administration (may not exceed 10% of line 21)				2000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	7344		7344	7344
8	1440 Site Acquisition				
9	1450 Site Improvement	52550		52550	8277
10	1460 Dwelling Structures	2819		2819	2819
11	1465.1 Dwelling Equipment—Nonexpendable	6000		6000	6000
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	9287		9287	9287
14	1485 Demolition	7201	· · · · · · · · · · · · · · · · · · ·	7201	7401
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of D	Pirect			
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	122352	***	122352	78079
21	Amount of line 20 Related to LBP Activities	•			
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs	33157			
25	Amount of line 20 Related to Energy Conservation Mea	sures			

To be completed for the Performance and Evaluation Report.
To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary	Grant Typean	ıd Number	Dl Housing Factor	r Grant No:	FFY of Grant: 2007	
PHA Name: Capital Typea Capital FundP Date of CFFP: R		ogram Grant No:	Replacement Housing Factor Grant No:		FFY of Grant Approval:	
Type of Grant						
X Original Annual Statement Reserve fo Performance and Evaluation Report for Period Ending	or Disasters/Emerge ig:		Annual Statement (revision no: Final Performance and Evaluat	ion Report	Total Actual Cost	
X Original Annual Statement Reserve fo	or Disasters/Emerg		Annual Statement (revision no: Final Performance and Evaluat Estimated Cost Revised	ion Report Obligated	Total Actual Cost Expended	

Part II: Supporting	Pages								
PHA Name: South Kingstown	Housing Authority	Grant Type and Capital Fund Prog Replacement Ho	I Number gram Grant No:RI43P01250107 CFFP (Yes/ No): susing Factor Grant No:		Federal FFY of Grant: 2007				
Development Number Name/PHA-Wide Activities	Number Categories		ijor Work Development Account No.		Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA WIDE	OPERATIONS		1406		39352				
na wide	Daily operations		1400		37332		39352	39352	
HA WIDE	MANANGE IMPI	ROVEM.	1408		5000		5000	5000	
	Computer support						3000	3000	
HA WIDE	FEES AND COST		1430		7344				
	Architect and engin	eer					7344	7344	
					50550				
TA THIESE	SITE IMPROVEN	<u>MENTS</u>	1450		52550		1875	1875	
HA WIDE	Landscaping			-		1	12829	6427	
12-01 Champ	Paving					 	5370	0427	
12-01 Fourn 12-03 Champ	Paving Cameras						32476		
	DWELLING STR	UCTURES	1460		2819				
12-01 Champ							2819	2819	

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program
² To be completed for the Performance and Evaluation Report.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and

Pages		,		-				<u> </u>
South Kingstown Housing Authority Capital Fund Progr		ram Grant No:RI43P01250107 CEEP (Ves/No):			Federal FFY of Grant: 2007			
General Description of Major Work Categories		· · · · · · · · · · · · · · · · · · ·	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
		1465.1		6000				
Stoves and refrigera	itors					3885	3885	
							- "	
Washer dryers						2115	2115	
NON DWELINNG	EOUIP	1475		9287				
Security cameras						3373	3373	" - "
Copier and scanner						5914	5914	
	General Description Categor DWELLING EQU Stoves and refrigera Washer dryers NON DWELINNO	Housing Authority Grant Type and Capital Fund Prog Replacement Ho General Description of Major Work Categories DWELLING EQUIP. NON EX Stoves and refrigerators Washer dryers NON DWELINNG EQUIP Security cameras	Housing Authority Grant Type and Number Capital Fund Program Grant No:Rl43I Replacement Housing Factor Grant Categories Development Account No. Development Account No. Development Account No. Major Work Categories Development Account No. Non EX 1465.1 Stoves and refrigerators Non Dwelinng Eouip 1475 Security cameras	Housing Authority Grant Type and Number Capital Fund Program Grant No:RI43P01250107 Replacement Housing Factor Grant No: General Description of Major Work Categories Development Account No. Development Account No. Development Account No. Non Ex 1465.1 Stoves and refrigerators NON DWELING EOUIP NON DWELING EOUIP Security cameras	Housing Authority Grant Type and Number Capital Fund Program Grant No:RI43P01250107 Replacement Housing Factor Grant No: General Description of Major Work Categories Development Account No. Original DWELLING EOUIP. NON EX Stoves and refrigerators Washer dryers NON DWELINNG EOUIP NON DWELINNG EOUIP 1475 9287 Security cameras	Housing Authority Grant Type and Number Capital Fund Program Grant No:RI43P01250107 Replacement Housing Factor Grant No: General Description of Major Work Categories Development Account No. Original Revised DWELLING EOUIP. NON EX 1465.1 6000 Stoves and refrigerators Washer dryers NON DWELINNG EOUIP 1475 Security cameras	Housing Authority Grant Type and Number Capital Fund Program Grant No:RI43P01250107 Replacement Housing Factor Grant No: General Description of Major Work Categories Development Account No. Original Revised Funds Obligated DWELLING EOUIP. NON EX 1465.1 6000 Stoves and refrigerators 3885 Washer dryers 2115 NON DWELING EOUIP 1475 9287 Security cameras 33373	Housing Authority Grant Type and Number Capital Fund Program Grant No:RI43P01250107 Replacement Housing Factor Grant No: CFFP (Yes/ No): 2007 General Description of Major Work Categories Development Account No. Original Revised Funds Obligated Funds Expended DWELLING EOUIP. NON EX 1465.1 6000 Stoves and refrigerators 3885 3885 Washer drivers 2115 2115 NON DWELING EOUIP 1475 9287 Security cameras 3373 3373 3373

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

¹ To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011
Expires 4/30/2011

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: South Kings	Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date		ds Expended Ending Date)	Reasons for Revised Target Da
12-1 Champagne 12-3 Champagne HA WIDE 12-1 Fournier 12-4 V.G	9/12/2009 9/12/2009 9/12/2009 9/12/2009 9/12/2009	09/12/2011 09/12/2011 09/12/2011 09/12/2011 09/12/2011	Actual Expenditure End Date	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Expires 4/30/2011

Part I:	Part I: Summary									
PHA Na		Grant Typeand Number Capital Fund Program Grant No:	Replacement Housing	Factor Grant No:	FFY of Grant: 2009					
South K	ingstown Housing Authority	Date of CFFP: R143P01250109			FFY of Grant Approval:					
Origi	Type of Grant Original Annual Statement Original Annual Statement X Performance and Evaluation Report for Period Ending:09/30/09 Revised Annual Statement (revision no:1 Final Performance and Evaluation Report									
Line	Summary by Development Account		Total Estimated Cost		Total Actual Cost					
		Original	Revised	Obligated	Expended					
1	Total non-CFP Funds									
2	1406 Operations (may not exceed 20% of line 21)	39222								
3	1408 Management Improvements	10000								
4	1410 Administration (may not exceed 10% of line 21)								
5	1411 Audit									
6	1415 Liquidated Damages			"""						
7	1430 Fees and Costs	25000		20000						
8	1440 Site Acquisition									
9	1450 Site Improvement	60000								
10	1460 Dwelling Structures									
11	1465.1 Dwelling Equipment—Nonexpendable									
12	1470 Non-dwelling Structures									
13	1475 Non-dwelling Equipment									
14	1485 Demolition									
15	1492 Moving to Work Demonstration									
16	1495.1 Relocation Costs									
17	1499 Development Activities 4									
18a	1501 Collateralization or Debt Service paid by the PF									
18ba	9000 Collateralization or Debt Service paid Via System of Payment	d'Direct								
19	1502 Contingency (may not exceed 8% of line 20)									
20	Amount of Annual Grant: (sum of lines 2 – 19)	134222								
21	Amount of line 20 Related to LBP Activities			-						
22	Amount of line 20 Related to Section 504 Activities				""					
23	Amount of line 20 Related to Security - Soft Costs									
24	Amount of line 20 Related to Security - Hard Costs	20000								
25	Amount of line 20 Related to Energy Conservation M	1easures								

To be completed for the Performance and Evaluation Report.

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I:	Summary				<u></u>	
PHA N	ame:	Grant Typea		Replacement Housing Factor	r Grant No:	FFY of Grant: 2009
			Program Grant No: RI43P01250109			FFY of Grant Approval:
Type of X Or Perfe		or Disasters/Emer ig:	gencies Revise	d Annual Statement (revision no: Final Performance and Evaluat		
Line	Summary by Development Account		Total	Estimated Cost		Total Actual Cost
Line	Summary by Development recours		Original	Revised	Obligated	Expended
Signature of Executive Director		Date 9/30/09	Signature of Public Housing	ousing Director Date		

Part II: Supporting	Pages								•
PHA Name: Grant Type and South Kingstown Housing Authority Capital Fund Programment Housing Authority		Number am Grant No:RI43P01250109 CFFP (Yes/ No): sing Factor Grant No:				Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories Developm Account				Total Estimated Cost		Total Actual Cost		Status of Work
		•			Original	Revised	Funds Obligated	Funds Expended	
HA WIDE	Operations		1406		39222				
HA WIDE	Software support		1408		5000				
HA WIDE	Staff training		1408		5000				
HA WIDE	Fees and Cost		1430		25000		2000		
12-1 Fournier	Landscaping		1450		5000				
HA WIDE	Cameras		1450		55000				
		 .							
					ļ		<u> </u>		

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Expires 4/30/2011

² To be completed for the Performance and Evaluation Report.

Part II: Supporting I PHA Name: South Kingstown H	-	Grant Type and Capital Fund Prog Replacement Ho	Grant Type and Number Capital Fund Program Grant No:RI43S01250109 Replacement Housing Factor Grant No:		CFFP (Yes/ No):		Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description Categor	of Major Work	Development Account No.	Flopment Quantity Total Estimated Cost Total Actual Cost		al Cost	Status of Work		
					Original	Revised	Funds Obligated	Funds Expended	
								-	
	***	N. 80							

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: South Kingst	own Housing Authority			Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		s Expended Ending Date)	Reasons for Revised Target Dates
12-1 Fournier 12-1 Champagne 12-3 Champagne Ha Wide	09/14/2011 09/14/2011 09/142011 09/14/2011 09/14/2011	09/14/2013 09/14/2013 09/14/2013 09/14/2013 09/14/2013	Actual Expenditure End Date	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Financing Program

OMB No. 2577-0226 Expires 4/30/2011

PHA Nam		Grant Type and Number Capital Fund Program Grant No:	Replacement Housing	Factor Grant No:	FFY of Grant: 2008	
South Kin	gstown Housing Authority	Date of CFFP: R143P01250108			FFY of Grant Approval:	
	rant I Annual Statement Reserve for Disasters ormance and Evaluation Report for Period Ending: 09/30/		sed Annual Statement (revision no Final Performance and Ev) aluation Report	1	
Line	Summary by Development Account	Tot	al Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended	
1	Total non-CFP Funds					
2	1406 Operations (may not exceed 20% of line 21)	39610				
3	1408 Management Improvements	9000		4650	4650	
4	1410 Administration (may not exceed 10% of line 21)					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement	1000				
10	1460 Dwelling Structures	34000				
11	1465.1 Dwelling Equipment—Nonexpendable					
12	1470 Non-dwelling Structures					
13	1475 Non-dwelling Equipment	38000		27252	27252	
14	1485 Demolition					
15	1492 Moving to Work Demonstration					
16	1495.1 Relocation Costs					
17	1499 Development Activities ⁴					
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of E Payment	AICCI.				
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant: (sum of lines 2 – 19)	121610		31902	31902	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities	1				
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Mea	sures				

To be completed for the Performance and Evaluation Report.
To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary				
PHA Name:	Grant Typeand Number Capital Fund Program Grant No:	Replacement Housing Factor	r Grant No:	FFY of Grant: 2008
South Kingstown Housing Authority	Date of CFFP: R143S01250108	_		FFY of Grant Approval:
Type of Grant Original Annual Statement Reserve for X Performance and Evaluation Report for Period Endin	Disasters/Emergencies Reviseog: 09/30/09	d Annual Statement (revision no: Final Performance and Evaluati) ion Report	
Line Summary by Development Account	Total	Total Estimated Cost		Total Actual Cost
	Original	Revised	Obligated	Expended
Signature of Executive Director	Date	Signature of Public Housing	Director	Date

Part II: Supporting	Pages								
South Kingstown Housing Authority Capital Fund		Grant Type and Capital Fund Prog Replacement Ho	nd Number ogram Grant No:RI43P01250108 CFFI Tousing Factor Grant No:			Y (Yes/No): Federal FFY of Grant: 2008			
Development Number Name/PHA-Wide Activities	General Description of Major Wor Categories				Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
	OPERATIONS		1406		39610	1			
<u>Ha wide</u>									
Ha wide	Mangement Impro	ovements	1408						
<u>-</u>	Staff training				3000				
	Computer support				6000		4650	4650	
	SITE IMPROVEN	MENTS	1450						
12-04 v.g.	landscaping				1000				
-	DWELLING STR	UCTURES	-						
12-01 CHAMP	Painting				17000				
12-03 CHAMP	Window replaceme	nt			17000				
	NON DWELL EQ	UIPMENT	1475						
12-1 FOURN	Cameras	<u> </u>			2000				
12-3 CHAMP	Cameras				2000				
12-1 CHAMP	Cameras				2000				
12-04 V.G	Cameras				2000				
HA WIDE	truck				30000		27252	27252	
	-								
									<u> </u>

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program
² To be completed for the Performance and Evaluation Report.

Part II: Supporting I	Pages								· · · · -
PHA Name: South Kingstown Housing Authority		Grant Type and Number Capital Fund Program Grant No:RI43PS01250109 Replacement Housing Factor Grant No:			CFFP (Yes/No):		Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description Categor	of Major Work	Development Account No.	Quantity	Total Estir	nated Cost	Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
			-						
		11.11							

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program

PHA Name: South Kingst	own Housing Authority			Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		ls Expended Ending Date)	Reasons for Revised Target Dates
12-1 Champagne 12-3 Champagne	09/30/2010 09/30/2010	09/30/2012 09/30/2012	Actual Expenditure End Date	
12-1 Fournier HA WIDE	09/30/2010 09/30/2010	09/30/2012 09/30/2012		

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

PHA Name: South Kingst	PHA Name: South Kingstown Housing Authority					
Development Number Name/PHA-Wide Activities	All Fund Ol (Quarter End		All Funds (Quarter Ei	Expended nding Date)	Reasons for Revised Target Dates ¹	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Financing Program

OMB No. 2577-0226 Expires 4/30/2011

Part I:	Summary						
PHA Na		Grant Typeand Number Capital Fund Program Grant No:	Replacement Housing	Factor Grant No:	FFY of Grant: 2006		
South K	ingstown Housing Authority	Date of CFFP: RI43P01250106	<u> </u>		FFY of Grant Approval:		
Type of Grant Capital Fund Program Original Annual Statement Reserve for Disasters/Emergencies X Performance and Evaluation Report for Period Ending: 9/30/09 Revised Annual Statement (revision no:) Final Performance and Evaluation Report							
Line	Summary by Development Account	.,	Total Estimated Cost		Total Actual Cost		
		Original	Revised	Obligated	Expended		
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21)	29550		29550	29550		
3	1408 Management Improvements	6583		6583	6583		
4	1410 Administration (may not exceed 10% of line 21)		·				
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs	5000		5000	5000		
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures	65000		65000	45999		
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment	18417		18417	18417		
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities ⁴						
18a	1501 Collateralization or Debt Service paid by the PH.						
18ba	9000 Collateralization or Debt Service paid Via System of Payment	Direct					
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of lines 2 – 19)	124550		124550	105549		
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security - Soft Costs						
24	Amount of line 20 Related to Security - Hard Costs	5000					
25	Amount of line 20 Related to Energy Conservation Me	easures					

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement,
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part I: Summary					
PHA Name:	Grant Typeand Number	Replacement Housing Factor Grant No:		FFY of Grant: 2006	
South Kingstown Housing Authority	Capital Fund Program Grant No: Date of CFFP: R143P01250106			FFY of Grant Approval:	
Type of Grant Original Annual Statement X Performance and Evaluation Report for Period En		d Annual Statement (revision no: Final Performance and Evaluation Rep			
Line Summary by Development Account	Tota	I Estimated Cost	Total A	etual Cost	
	Original	Revised	Obligated	Expended	
Signature of Executive Director	Date ,	Signature of Public Housing Direc	tor	Date	
Man Asselii	9/30/0	î			

Part II: Supporting	Pages								
PHA Name: South Kingstown	Housing Authority	Grant Type and Capital Fund Prog Replacement Ho	Number gram Grant No:RI43P01250106 CFFP (Yes/ No): using Factor Grant No:			Federal FFY of Grant: 2006			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Quantity Account No.		Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
HA WIDE	OPERATIONS		1406		29550				
• • •	Daily operations						29550	29550	
HA WIDE	MANAG. IMPRO	VEMENTS	1408		5000				
	Staff training						5975	5975	
	Computer support						4025	4025	
HA WIDE	FEES AND COST		1430		5000				
	Architect and engir	neer					5000	5000	
HA WIDE	DWELLING STR	UCTURES	1460		65000				
	Update fire code						42300	23299	
12-04 V.G	Painting						22700	22700	
	NON DWELLING		1475		<u> 18417</u>				
12-3 Champ	Security cameras/re	ecorder					9436	9436	
12-1 Champ	Computer hardware	2					8981	8981	
								!	

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting I	Pages								
PHA Name: Grant T South Kingstown Housing Authority Capital Fi Replacer		Grant Type and Capital Fund Prog Replacement Hor	rant Type and Number pital Fund Program Grant No:RI43P01250106 placement Housing Factor Grant No:		CFFP (Yes/No):		Federal FFY of Grant: 2006		
Development Number Name/PHA-Wide Activities	General Description Categor	of Major Work			Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011

PHA Name: South Kingstown	Housing Authority		Federal FFY of Grant: 2006
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Par	t I: Summary					
Soutl	h Kingstown Housing Author	ity RI012	Wakefield, F	Rhode Island	Original 5-Year Plan	Revision No:4
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014
B.	Physical Improvements Subtotal	Annual Statement	57352	57352	57352	57352
C.	Management Improvements		20000	20000	20000	20000
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations		56870	56870	56870	56870
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		134222	134222	134222	134222
L.	Total Non-CFP Funds					
M.	Grand Total			·		•

Par	t I: Summary (Continua	ation)					
South	South Kingstown Housing Authority RI		Wakefield,	Rhode Island	☐Original 5-Year Plan ☐Revision No:		
A.	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014	
		Annual Statement					

Work		eal Needs Work Staten ork Statement for Year 2011		Work Statement for Year: 2012			
Statement for	FFY 2011 FFY 2012				FFY 2012		
Year 1 FFY	Development	Quantity	Estimated Cost	Development	Quantity	Estimated Cost	
	Number/Name	Ţ		Number/Name			
	General Description of			General Description of			
	Major Work Categories			Major Work Categories			
See	12-01 Champagne			12-01 Champagne			
Annual	Renovations		10588	Security cameras		1000	
Statement	landscaping		1000	renovations		10588	
	renovations		10588	landscaping		1000	
	12-03 Champagne			renovations		10588	
	Renovations		10588	12-03 Champagne			
	landscaping		1000	Security cameras		1000	
	Playground/park		11000	renovations		10588	
				landscaping		1000	
	12-1 Fournier						
	Renovations		10588				
	landscaping		1000	12-1 Fournier			
				Security cameras		1000	
				renovations		10588	
	12-04 VG			Playground/park		7000	
	Landscaping		1000	12-04 VG			
				Landscaping		1000	
	Subt	otal of Estimated Cost	\$ 57352	Subtot	al of Estimated Cost	57352	

Page 3 of 6

	porting Pages – Physic			XX7 1	G			
Work	Wo	ork Statement for Year 2013		Work	Statement for Year: 2014	14		
Statement for	D 1	FFY 2013	F 1.0	FFY 2014 Overtity Festimated Co				
Year 1 FFY	Development Number/Name	Quantity	Estimated Cost	Development Number/Name	Quantity	Estimated Cost		
	General Description of			General Description of				
	Major Work Categories			Major Work Categories				
See	12-01 Champagne			12-01 Champagne				
Annual	Security cameras		1000	Security cameras		1000		
Statement	paving		10588	Painting		10588		
Statement	Washer/dryer		10588	Washer/dryer		10588		
				12-03 Champagne				
	12-03 Champagne			painting		10000		
	Security cameras		1000	Security cameras		1000		
	Paving		10000	Washer/dryer		10588		
	Washer /dryer		10588	landscaping		1000		
	landscaping		1000	12-1 Fournier				
	12-1 Fournier			Security cameras		1000		
	paving		10588	painting		10588		
	Security cameras		1000	12-04 VG				
				Landscaping		1000		
	12-04 VG							
	Landscaping		1000					
	Coshe	otal of Estimated Cost	57352	Cubtat	al of Estimated Cost	57352		
	Subt	otal of Estimated Cost	3/332	Subtot	ai oi Estimated Cost	31332		

Part III: Sup	porting Pages – Management Needs Worl	x Statement(s)			
Work	Work Statement for Year 20.	11	Work Statement for Year: 20	12	
Statement for	FFY 2011		FFY 2012		
Year 1 FFY	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
See					
Annual	HA WIDE		HA WIDE		
Statement	Operations	56870	Operations	56870	
	Software support	5000	Software support	5000	
	Fee and costs	10000	Fee and costs	10000	
	Staff training	5000	Staff training	5000	
	Subtotal of Estimated Cost	\$ 134222	Subtotal of Estimated Cost	\$ 134222	

Part III: Sup	porting Pages – Management Needs Worl	k Statement(s)		
Work	Work Statement for Year 20	13	Work Statement for Year: 20	14
Statement for	FFY 2013		FFY 2014	
Year 1 FFY	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See	HA WIDE		HA WIDE	
Annual	Operations	56870	Operations	56870
Statement	Software support	5000	Software support	5000
	Fee and costs	10000	Fee and costs	10000
	Staff training	5000	Staff training	5000
	Subtotal of Estimated Cost	\$ 134222	Subtotal of Estimated Cost	\$ 134222

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Capital Fund Financing Program

OMB No. 2577-0226 Expires 4/30/2011

Part I:	Summary				
PHA Na	me:	Grant Typeand Number Capital Fund Program Grant No:	Replacement Housing Fa	ctor Grant No:	FFY of Grant: 2009
South Ki		Date of CFFP: R143S01250109			FFY of Grant Approval:
			ised Annual Statement (revision no: X Final Performance and Evalu) nation Report	
Line	Summary by Development Account		tal Estimated Cost		Total Actual Cost
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21)				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
8	1430 Fees and Costs 1440 Site Acquisition				
9	1440 Site Acquisition 1450 Site Improvement				
10	1460 Dwelling Structures	153934		153934	153934
11	1465.1 Dwelling Equipment—Nonexpendable	133934		133734	1.55954
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration		"		
16	1495.1 Relocation Costs				
17	1499 Development Activities 4				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of D				
	Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	153934		153934	153934
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs	*			
25	Amount of line 20 Related to Energy Conservation Mea	asures		ļ	

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary					
PHA Name:	Grant Typeand Number Capital FundProgram Grant No	Replacement Housing Fa		FFY of Grant: 2009 FFY of Grant Approval:	
South Kingstown Housing Authority	Date of CFFP: R143S01250109		1		
Performance and Evaluation Report for Period Ending	Disasters/Emergencies	Revised Annual Statement (revision no: Final Performance and Eval			
Line Summary by Development Account		Total Estimated Cost	Tota	l Actual Cost	
	Origin	nal Revised	Obligated	Expended	
Signature of Executive Director	Date	Signature of Public Hous		Expended	

Part II: Supporting	Pages								
PHA Name: Grant Type and Nu South Kingstown Housing Authority Capital Fund Program Replacement Housin			m Grant No:RI43S01250109			Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities	General Description Categor		Development Account No.	t Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
	DWELLING STRU		1460						
12-01 CHAMP	Painting 7bldgs =	28 units	·		92534		92534	92534	,
	Repair and replace needed and paint bl								
12-03 CHAMP	Painting 3 bldgs =				14200		14200	14200	
	Repair and replace								
	needed and paint bl								
12-01 FOURN	Painting 3 blds = 1				14200		14200	14200	
	Repair and replace:	shingles where							
	needed and paint b								
12-01 CHAMP	Windows 1 bldg of				33000		33000	33000	
	Replace 11 existing	windows							
12-03 CHAMP	Windows 12 units				Į.				
	Replace 96 existing	windows					·		
					ļ				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Part II: Supporting I	Pages								
PHA Name:		Grant Type and Number Capital Fund Program Grant No:RI43S01250109 Replacement Housing Factor Grant No:			CFFP (Yes/ No):		Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description Categor	of Major Work	Development Account No.		Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated	Funds Expended	
					 .				
								- · · · - · ·	

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011 Expires 4/30/2011

PHA Name: South King	Federal FFY of Grant: 2009				
Development Number Name/PHA-Wide Activities	Name/PHA-Wide (Quarter Ending Date) (Quarter Ending Date)				Reasons for Revised Target Dates
12-1 Champagne 12-3 Champagne	3/17/2010		3/17/2012	Actual Expenditure End Date 09/09/2009	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011

PHA Name: South Kingsto	own Housing Authority		107		Federal FFY of Grant: 2009	
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)			Expended nding Date)	Reasons for Revised Target Dates 1	
12-1 Fournier	3/17/2010		03/17/2012	09/09/2009		

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.